

County: Winnebago  
 PARK VIEW HC REHAB PAVILION  
 725 BUTLER AVE

Facility ID: 9520

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WINNEBAGO 54985 Phone:(920) 235-5100  
 Operated from 1/1 To 12/31 Days of Operation: 366  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/04): 99  
 Total Licensed Bed Capacity (12/31/04): 105  
 Number of Residents on 12/31/04: 99

Ownership:  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? No  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 100

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)			
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	28.3		
Supp. Home Care-Personal Care	No					1 - 4 Years	51.5		
Supp. Home Care-Household Services	No	Developmental Disabilities	2.0	Under 65	17.2	More Than 4 Years	20.2		
Day Services	No	Mental Illness (Org./Psy)	67.7	65 - 74	22.2				
Respite Care	No	Mental Illness (Other)	25.3	75 - 84	38.4				
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	21.2				
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	1.0				
Congregate Meals	Yes	Cancer	0.0			Full-Time Equivalent			
Home Delivered Meals	No	Fractures	0.0		100.0	Nursing Staff per 100 Residents			
Other Meals	No	Cardiovascular	0.0	65 & Over	82.8	(12/31/04)			
Transportation	No	Cerebrovascular	1.0						
Referral Service	No	Diabetes	0.0	Gender	%	RNs	6.5		
Other Services	Yes	Respiratory	0.0			LPNs	12.9		
Provide Day Programming for		Other Medical Conditions	4.0	Male	43.4	Nursing Assistants,			
Mentally Ill	No			Female	56.6	Aides, & Orderlies	68.6		
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	2	2.2	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	2.0
Skilled Care	0	0.0	0	86	95.6	119	0	0.0	0	9	100.0	185	0	0.0	0	0	0.0	95	96.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	2	2.2	178	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	2.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		90	100.0		0	0.0		9	100.0		0	0.0		0	0.0	99	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	10.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	4.0	54.5	41.4	99
Other Nursing Homes	39.5	Dressing	15.2	54.5	30.3	99
Acute Care Hospitals	36.8	Transferring	46.5	37.4	16.2	99
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	28.3	42.4	29.3	99
Rehabilitation Hospitals	0.0	Eating	38.4	39.4	22.2	99
Other Locations	13.2	*****				
Total Number of Admissions	38	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.1	Receiving Respiratory Care	4.0	
Private Home/No Home Health	15.8	Occ/Freq. Incontinent of Bladder	64.6	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	48.5	Receiving Suctioning	0.0	
Other Nursing Homes	5.3			Receiving Ostomy Care	2.0	
Acute Care Hospitals	13.2	Mobility		Receiving Tube Feeding	1.0	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	19.2	Receiving Mechanically Altered Diets	48.5	
Rehabilitation Hospitals	0.0					
Other Locations	7.9	Skin Care		Other Resident Characteristics		
Deaths	57.9	With Pressure Sores	1.0	Have Advance Directives	12.1	
Total Number of Discharges		With Rashes	9.1	Medications		
(Including Deaths)	38			Receiving Psychoactive Drugs	84.8	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Government %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	93.1	1.02	90.2	1.06	90.5	1.05	88.8	1.07
Current Residents from In-County	94.9	86.2	1.10	82.9	1.15	82.4	1.15	77.4	1.23
Admissions from In-County, Still Residing	73.7	33.0	2.23	19.7	3.74	20.0	3.69	19.4	3.80
Admissions/Average Daily Census	38.0	79.1	0.48	169.5	0.22	156.2	0.24	146.5	0.26
Discharges/Average Daily Census	38.0	78.7	0.48	170.5	0.22	158.4	0.24	148.0	0.26
Discharges To Private Residence/Average Daily Census	6.0	29.9	0.20	77.4	0.08	72.4	0.08	66.9	0.09
Residents Receiving Skilled Care	98.0	89.7	1.09	95.4	1.03	94.7	1.04	89.9	1.09
Residents Aged 65 and Older	82.8	84.0	0.99	91.4	0.91	91.8	0.90	87.9	0.94
Title 19 (Medicaid) Funded Residents	90.9	73.3	1.24	62.5	1.46	62.7	1.45	66.1	1.38
Private Pay Funded Residents	9.1	18.3	0.50	21.7	0.42	23.3	0.39	20.6	0.44
Developmentally Disabled Residents	2.0	2.7	0.75	0.9	2.14	1.1	1.80	6.0	0.33
Mentally Ill Residents	92.9	53.0	1.75	36.8	2.53	37.3	2.49	33.6	2.76
General Medical Service Residents	4.0	18.6	0.22	19.6	0.21	20.4	0.20	21.1	0.19
Impaired ADL (Mean)	50.9	47.5	1.07	48.8	1.04	48.8	1.04	49.4	1.03
Psychological Problems	84.8	69.4	1.22	57.5	1.48	59.4	1.43	57.7	1.47
Nursing Care Required (Mean)	8.2	7.4	1.11	6.7	1.22	6.9	1.19	7.4	1.10